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1647

EXPRESS MAIL NO.: EV 106028075 US

DATE DEPOSITED: 05/28/2002

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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/842,930
	Filing Date	04/25/2001
	First Named Inventor	Paul H. Weigel et al.
	Group Art Unit	1647
	Examiner Name	L. Spector
	Total Number of Pages in This Submission	Attorney Docket Number

ENCLOSURES <i>(check all that apply)</i>		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> SEE REMARKS
Remarks 1. Transmittal Form PTO/SB/21 (1 page); 2. Fee Transmittal for FY 2001 PTO/SB/17 (1 page); 3. Fee Determination Record PTO/SB/06 (1 PAGE); 4. Response to Office Action dated 04/29/2002 (4 pages); 5. Post Card		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Dunlap, Coddling & Rogers, P.C., P.O. Box 16370, Oklahoma City, OK 73113. CUSTOMER NO. 30589 Kathryn L. Hester, Ph.D., Reg. No. 46,768	
Signature		
Date	5/28/02	

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail or U.S. Express mail no. EV 106028075 US in an envelope addressed to the address below on this date: 05/28/2002			
Typed or printed name	Kathryn L. Hester, Ph.D.		
Signature		Date	5/28/02

SEND TO: Box Non-Fee Amendment
Commissioner For Patents
Washington, D.C. 20231

ATTENTION: Due to the indefinite suspension of U.S. Post Office Express Mail services, and pursuant to U.S. Patent and Trademark Office ("USPTO") instructions on 11/19/2001. This Response to the Office Action dated April 29, 2002 is being deposited on 05/28/2002 by U.S. Express Mail No. EV106028075US addressed to: COMMISSIONER OF PATENTS, 2900 CRYSTAL DRIVE, ARLINGTON, VA 22202-3513. IT IS FURTHER OUR UNDERSTANDING THAT THE USPTO WILL BE RESPONSIBLE FOR FORWARDING ALL OF THE ENCLOSED DOCUMENTS TO THE USPTO OFFICE LOCATED IN WASHINGTON D.C.

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Date Deposited: 05/28/2002



PTO/SB/17 (11-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) 0

Complete if Known

Application Number 09/842,930
Filing Date 04/25/2001
First Named Inventor Paul H. Weigel et al.
Examiner Name L. Spector
Group Art Unit 1647
Attorney Docket No. 5820.603

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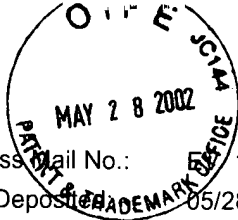
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METHOD OF PAYMENT		FEE CALCULATION (continued)																									
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: Deposit Account Number 04-1700 Deposit Account Name DUNLAP, CODDING & ROGERS, P.C. CUSTOMER NO. 30589 <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		3. ADDITIONAL FEES																									
2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other																											
FEE CALCULATION																											
1. BASIC FILING FEE																											
<table border="1"><thead><tr><th>Large Entity Fee Code (\$)</th><th>Small Entity Fee Code (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>101 740</td><td>201 370</td><td>Utility filing fee</td><td></td></tr><tr><td>106 330</td><td>206 165</td><td>Design filing fee</td><td></td></tr><tr><td>107 510</td><td>207 255</td><td>Plant filing fee</td><td></td></tr><tr><td>108 70</td><td>208 370</td><td>Reissue filing fee</td><td></td></tr><tr><td>114 160</td><td>214 80</td><td>Provisional filing fee</td><td></td></tr></tbody></table>		Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid	101 740	201 370	Utility filing fee		106 330	206 165	Design filing fee		107 510	207 255	Plant filing fee		108 70	208 370	Reissue filing fee		114 160	214 80	Provisional filing fee			
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SUBTOTAL (1) (\$) 0																											
2. EXTRA CLAIM FEES																											
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SUBTOTAL (2) (\$) 0																											
**for number previously paid, if greater; For Reissues, see above																											
		Other fee (specify) _____																									
		*Reduced by Basic Filing Fee Paid																									
		SUBTOTAL (3) (\$) 0																									

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Kathryn L. Hester, Ph.D.	Registration No. (Attorney/Agent)	46,768
Signature		Telephone	(405) 478-5344
		Date	5/28/02

BOX NON-FEE AMENDMENT
COMMISSIONER FOR PATENTS
WASHINGTON, D.C. 20231

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PTO/SB/06 (08-00)

Approved for use through 10/31/2002. OMB 0651-0032
U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD					Application or Docket Number 8403.244			
CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY OR OTHER THAN SMALL ENTITY			
FOR	NUMBER FILED	NUMBER EXTRA			RATE	FEE	RATE	FEE
BASIC FEE (37 CFR 1.16(a))					\$ 355		\$ 0	
TOTAL CLAIMS (37 CFR 1.16(c))	87	minus 20 =	* 67		x \$ 9 =	603	x \$ 18 =	0
INDEPENDENT CLAIMS (37 CFR 1.16(b))	36	minus 3 =	* 33		x 40 =	1320	x 84 =	0
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				0	+ 140 =	0	+ 280 =	0
				TOTAL	2278	OR	TOTAL	0
* If the difference in column 1 is less than zero, enter "0" in column 2								
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)					SMALL ENTITY OR OTHER THAN SMALL ENTITY			
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	Total (37 CFR 1.16(c))	* 87	Minus	** 87	=	0	x \$ 18 =	0
	Independent (37 CFR 1.16(b))	* 36	Minus	*** 36	=	0	x 84 =	0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ 140 =	0	+ 280 =	0
				TOTAL	0	OR	TOTAL	0
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	Total (37 CFR 1.16(c))	* 29	Minus	** 87	=	0	x \$ 18 =	0
	Independent (37 CFR 1.16(b))	* 12	Minus	*** 36	=	0	x 84 =	0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ 140 =	0	+ 280 =	0
				TOTAL	0	OR	TOTAL	0
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	Total (37 CFR 1.16(c))	* 0	Minus	** 0	=	0	x \$ 18 =	0
	Independent (37 CFR 1.16(b))	* 0	Minus	*** 0	=	0	x 84 =	0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ 140 =	0	+ 280 =	0
				TOTAL	0	OR	TOTAL	0
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.								

APPLICATION
FILING DATE
04/25/2001PRELIMINARY
AMENDMENT
FILING DATE
08/22/2001RESPONSE TO
OFFICE ACTION
DATED 04/29/2002
ELECTION
FILING DATE
05/28/2002SEND TO: BOX NON-FEE AMENDMENT
COMMISSIONER OF PATENTS
WASHINGTON, D.C. 20231

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